



AUTHORIZATION FOR PAYROLL CHECKS TO BE DIRECT DEPOSITED

Print Name: _____ **Social Security #** _____

Bank Name: _____

Signature: _____ **Date:** _____

Checking Account **Savings Account**

In order to set up the Direct Depoist, we require either a voided check **OR** a printout from your bank with the routing number and account number listed.

****We also offer FLAT FEE deposit - If you would like to make a set dollar amount deposit each pay period to another account, you will need to fill out a flat fee form. Please contact Laurie Fielder in finance for this form.**